



Name :

PASSPORT - I

ID No :

Name of the clinic :

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Name :

ID No : **D.O.B :** **M | F**

Address:

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Phone No: (Primary contact)

Phone No: (Secondary contact),

Name of parent / guardian with relationship:

.....

Educational status:

Medical Insurance : yes no

if YES DETAILS:

.....

Contributors

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Federation of India
Chairperson : Down Syndrome
Association of Tamilnadu

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DOWN SYNDROME
FEDERATION OF INDIA

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Medical Passport for Persons with Down Syndrome - Birth to 12 months -

Date:

Hospital of birth with place: Country of origin:

Diagnoses:

Karyotype: Non Disjunction Translocation Mosaic Date:

Details(pic upload if possible)

Neonatal History:

Birth weight:Kg Length: cm OFC(HC):

Mode of Delivery: Apgars: 1min 5min

Cry after birth: Immediate After stimulation After resuscitation (give details)

Summary of the neonatal period:

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Informed parents and counseled after birth: Yes No

When was information given?

FEEDING HISTORY:

a. Breastfeeding: Yes No Exclusive Breast feeds

i) Duration of feed..... min

ii) Frequency of feeds: every hrs

b. Formula feeds Yes No

If yes:

Mode of feeding: Bottle feeding Spoon Small cup

Type of formula: Frequency of feeds:

Volume of feeds: Total formula feeds in 24 hours:

c. Tube feeding: Yes No

If yes details:

ENQUIRE

During breast feeding:

- Breathlessness while feeding
- Coughing spells while feeding
- Choking spells while feeding
- Cyanotic spells

(THESE SYMPTOMS ARE SUGGESTIVE OF SUCK-SWALLOW INCOORDINATION)

Feeding issues, if any / other details:

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History of Gastro-esophageal reflux (GER):

- Regurgitation Yes No
Vomiting Yes No
Acute life threatening episodes Yes No
Persistent projectile vomiting (rule out surgical causes) Yes No

Bowel habits:

- Age appropriate regular habits Constipated

If constipated, details and management advised:

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Feeding / Dietary advice given:

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History of recurrent respiratory infection: (Aspiration/Atopy/Cardiac causes)

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Evaluation of growth using Down syndrome growth charts

Physical examination:

Weight:Kg Height:cm OFC/HC:cm

Heart rate:/min Respiratory rate:/min

- Anaemia Cyanosis Icterus

Lymphadenopathy If yes; details:

Skin:

Vision:

Red reflex: Yes No (to Rule out cataract)

ENT:

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Others:

Developmental Milestones: time line

Milestones	Time line
01) Social smile months
02) Head control months
03) Rolling over months
04) Sitting without support months
05) Standing without support months
06) Walking without support months
07) Speech	
a) Cooring months
b) Babbling months
c) Mono / Bisyllables months
d) Single words months

Comments about Development and Cognition:

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Systemic examination:

Cardiovascular:

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Respiratory:

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Abdomen:

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Neurological:

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Musculo-skeletal:

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Genito-urinary:

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INVESTIGATIONS:

2D Echocardiogram (advisable even if a murmur is not present)

Date :

ECHO Diagnoses:

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Hearing evaluation: (Hearing evaluation should be completed by 6 months of age)

OAE at birth (DD : MM : YY)

R : PASS / FAIL / REFER

L : PASS / FAIL / REFER

(REFER= Repeat test / AEBR)

AEBR:(DD : MM : YY)

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Hearing loss:

None Mild Moderate Moderately Severe Severe Profound

(Mild - 20-40 dB, Moderate - 41-55 dB, Moderately severe - 56-70 dB, Severe - 71-90 dB, Profound - 91 or more)

Sensori-neural hearing loss:

Yes No

Conductive hearing loss:

Yes No

Blood tests:

Blood group & Rh Typing:

New Born Screening TSH (if available): DD : MM : YY **Result :**

1 Month: DD : MM : YY Haemoglobin: FT4: TSH:

6 Month: DD : MM : YY Haemoglobin: FT4: TSH:

12 Month: DD : MM : YY Haemoglobin: FT4: TSH:

Immunisation status:

Immunized up to date Yes No (ADD CHART UP TO 1 YR)

Measles vaccine DD : MM : YY

BCG/ OPV DD : MM : YY

Pentavac 1 DD : MM : YY **2** DD : MM : YY **3** DD : MM : YY

Pneumococcal 1 DD : MM : YY **2** DD : MM : YY **3** DD : MM : YY

MMR DD : MM : YY **Other Vaccines:** Rotavirus Chicken pox Hepatitis A

REMARKS:

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SPECIALIST CONSULT

- Cardiologist DD : MM : YY
- ENT DD : MM : YY
- Ophthalmologist DD : MM : YY
- Endocrinologist DD : MM : YY
- Psychiatrist / physiotherapist DD : MM : YY
- Occupational therapist DD : MM : YY
- Speech pathologist / therapist DD : MM : YY

DISCUSS ABOUT FOLLOW UP PLANS:

- Medical screening and need for regular follow up.
- Developmental concerns:
- Milestones .
- Activities of daily living
- Cognitive concerns
- Speech and language
- Discuss/reinforce need for early intervention programme and need for regular follow up

SOCIAL SUPPORT GROUP:

- Yes No

(refer to a support group if available)

Follow up visits - Birth to 12 months (every 3 months)

Quarterly Visit - 1

Date:

Weight: kg Height: cms. OFC/HC:

General examination:

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Check and record developmental milestones:

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Systemic examination findings, if relevant:

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Anticipatory guidance:

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Plan and follow up:

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Check and document medications:

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Follow up visits - Birth to 12 months (every 3 months)

Quarterly Visit - 2

Date:

Weight: kg Height: cms. OFC/HC:

General examination:

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Check and record developmental milestones:

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Systemic examination findings, if relevant:

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Anticipatory guidance:

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Plan and follow up:

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Check and document medications:

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Follow up visits - Birth to 12 months (every 3 months)

Quarterly Visit - 3

Date:

Weight: kg Height: cms. OFC/HC:

General examination:

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Check and record developmental milestones:

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Systemic examination findings, if relevant:

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Anticipatory guidance:

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Plan and follow up:

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Check and document medications:

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Follow up visits (1 year – 12 years)

Evaluate every 6 months till 5 years, thereafter annually (tick if done)

Enquire about developmental milestone

Example: child with DS not walking beyond three years of age (range 1-4 years)

Enquire about speech / language

Nutrition evaluation

Detailed history regarding the diet and if child is chewing well

Immunisation history

Continue to monitor growth in the DS growth charts

Visual evaluation: Annually

Auditory evaluation: Annually

Dental examination: Every 6 months till 5 years, thereafter annually

Evaluation for obstructive sleep apnea

Examination of the tonsils to look for tonsillar enlargement

Haemoglobin estimation annually till 5 years

Thyroid evaluation (FT4 and TSH): Annually till 5 years, thereafter every 5 years

Cervical spine X-Ray (Optional) at 3 – 5 years - To rule out AAI

Consider X-Ray if taking part in contact sports

Close monitoring is needed if the distance is more than 5mm.

Look for neurological dysfunction: If present refer to neurosurgical /orthopaedics team

DEVELOPMENTAL ASSESSMENT

Schooling history

Follow up visits (1 year – 12 years)

First Year Visit - 1

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

First Year Visit - 2

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Second Year Visit - 1

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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.....

Follow up visits (1 year – 12 years)

Second Year Visit - 2

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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.....

Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Third Year Visit - 1

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Third Year Visit - 2

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Fourth Year Visit - 1

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Fourth Year Visit - 2

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Fifth Year Visit - 1

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Fifth Year Visit - 2

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Sixth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Seventh Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Eighth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Ninth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Tenth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Eleventh Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (1 year – 12 years)

Twelfth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: OFC/HC:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Developmental assessment / remarks:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy, Occupational therapy, Physical therapy, development, schooling.)

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Plan and follow up:

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Follow up visits (12 years – 18 years)

Annual evaluation:

- Speech / language / communication skills
- Diet and regular exercise programme
- Puberty / Sexual issues
- Menstrual cycles in females
- Evaluation for sleep apnea
- Auditory testing once in 2 years
- Eye examination – annual review
- Dental evaluation – annual review
- Neurological evaluation to rule out any effect of AA subluxation.
- Cervical spine X-Ray: Optional
- Hb /TSH / FT4 - Once in five years, if normal
- Discuss about schooling and progress
- Plan for vocational training
- Sexuality education depending on need.

Follow up visits (12 years – 18 years)

Thirteenth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: BMI: Heart Rate: BP:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Psychological & adolescent issues:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy & Occupational therapy;
Physical therapy where indicated)

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Plan and follow up:

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Follow up visits (12 years – 18 years)

Fourteenth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: BMI: Heart Rate: BP:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Psychological & adolescent issues:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy & Occupational therapy;
Physical therapy where indicated)

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Plan and follow up:

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Follow up visits (12 years – 18 years)

Fifteenth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Other tests:

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Physical examination:

Weight: kg Height: cms. BMI: Heart Rate: BP:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Psychological & adolescent issues:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy & Occupational therapy;
Physical therapy where indicated)

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Plan and follow up:

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Follow up visits (12 years – 18 years)

Sixteenth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: cms. BMI: Heart Rate: BP:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Psychological & adolescent issues:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy & Occupational therapy;
Physical therapy where indicated)

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Plan and follow up:

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Follow up visits (12 years – 18 years)

Seventeenth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: cms. BMI: Heart Rate: BP:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Psychological & adolescent issues:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy & Occupational therapy;
Physical therapy where indicated)

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Plan and follow up:

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Follow up visits (12 years – 18 years)

Eighteenth Year Follow up Visit

Date:

DD : MM : YY Haemoglobin:

Other tests:

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Physical examination:

Weight: kg Height: cms. BMI: Heart Rate: BP:

General Examination: (Look for pallor, alopecia, cheilosis, dryness of skin)

VISUAL:

ENT :

Dental:

Remarks:

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Systemic examination:

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Psychological & adolescent issues:

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Brief summary of findings:

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Anticipatory guidance: (Need to continue Speech therapy & Occupational therapy;
Physical therapy where indicated)

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Plan and follow up:

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Follow up visits (>18 years)

Annual evaluation:

- Routine adult healthcare
 - Blood pressure monitoring
- Visual evaluation
- Dental evaluation
- ENT Evaluation every year and Auditory testing once in 2 years
- Clinical evaluation for functional abilities
- Evaluation for sleep apnea
- Neurological evaluation for early signs of dementia
- Look for Behavioural challenges and Psychiatry referral if needed
- Evaluate diet and exercise - Life style modification as required low calorie, high fibre diet, Regular exercise programme
- Reproductive counseling
- Hb /TSH / FT4 once in 5 years or earlier if needed.
- Screening for osteoporosis
- Screening for hypercholesterolemia
- HbA1c as required

Date, evaluation and remarks:

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Follow up visits (>18 years)

Visit on age 19

Date:

DD : MM : YY Haemoglobin:

Visit on age 20

Date:

DD : MM : YY Haemoglobin: FT4: TSH:

Congratulations! Please apply for a new passport on your 21st birthday

Comments on compliance







Doctor's contact details

Name :

Phone No:

Address:

.....

Emergency contact details

Doctor -1

Name :

Phone No:

Address:

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Doctor -2

Name :

Phone No:

Address:

.....

Doctor -3

Name :

Phone No:

Address:

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Pd
own's syndrome
passport

